

U.S. DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS ATTORNEY APPEARANCE FORM

NOTE: In order to appear before this Court an attorney must either be a member in good standing of this Court's general bar or be granted leave to appear *pro hac vice* as provided for by Local Rules 83.12 through 83.14.

In	the	M	atter	of I	(R	ΙΔ	N	NF	V	71	\cap	CF.	R	1	Æ	Δ	N	J
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Case Number:

08 C 4131

v. SKIN WELLNESS CENTER, S.C. and BROOKE JACKSON, M.D.

AN APPEARANCE IS HEREBY FILED BY THE UNDERSIGNED AS ATTORNEY FOR:

Defendants SKIN WELLNESS CENTER, S.C. and BROOKE JACKSON, M.D.

NAME (Type or print)						
MICHAEL B. BROHMAN						
SIGNATURE (Use electronic signature if the appearance form is filed electronically)						
s/Michael B. Brohman						
FIRM KAMENSKY RUBINSTEIN HOCHMAN & DELOTT, LLP						
STREET ADDRESS 7250 N. Cicero #200						
CITY/STATE/ZIP Lincolnwood, IL 60712						
ID NUMBER (SEE ITEM 3 IN INSTRUCTIONS) 3124085	TELEPHONE NUMBER (847) 982-1776					
ARE YOU ACTING AS LEAD COUNSEL IN THIS CASE? (Enter "Y" or "N") Y						
ARE YOU ACTING AS LOCAL COUNSEL IN THIS CASE? (Enter "Y" or "N") N						
ARE YOU A MEMBER OF THIS COURT'S TRIAL BAR? (Enter "Y" or "N") Y						
IF THIS CASE REACHES TRIAL, WILL YOU ACT AS THE TRIAL ATTORNEY? (Enter "Y" or "N") Y						
IF THIS IS A CRIMINAL CASE, USE AN "X" TO DESCRIBE YOUR STATUS IN THIS CASE.						
RETAINED COUNSEL APPOINTED COUNSEL						